

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 4  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>New Prosperity Foundation; The</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00488494	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>XPS Professional Services</b>		Date MM / DD / YYYY <b>11 / 01 / 2012</b>	
Mailing Address 220 E Adams St Suite 200		Amount <b>630.00</b>	
City Springfield	State IL	Zip Code 62701	Transaction ID : <b>SE.5006</b>
Purpose of Expenditure Walk Cards	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>IL</u> District: <u>11</u>
Name of Federal Candidate Supported or Opposed by Expenditure: G. WILLIAM (BILL) FOSTER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>245160.92</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <b>XPS Professional Services</b>		Date MM / DD / YYYY <b>11 / 01 / 2012</b>	
Mailing Address 220 E Adams St Suite 200		Amount <b>630.00</b>	
City Springfield	State IL	Zip Code 62701	Transaction ID : <b>SE.5007</b>
Purpose of Expenditure Walk Cards	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: <u>IL</u> District: <u>17</u>
Name of Federal Candidate Supported or Opposed by Expenditure: CHERI BUSTOS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>228331.22</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<b>1260.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gregory Baise

Signature

[Electronically Filed]

Date

MM / DD / YYYY  
**11 / 02 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 2 OF 4  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>New Prosperity Foundation; The</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00488494	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</div></div> </div>	

  

Full Name (Last, First, Middle Initial) of Payee <b>XPS Professional Services</b>		Date <div style="display: flex; justify-content: space-around;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</div></div> </div>	
Mailing Address 220 E Adams St Suite 200		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">630.00</div>	
City Springfield	State IL	Zip Code 62701	
Purpose of Expenditure Walk Cards	Category/ Type	Transaction ID : <b>SE.5008</b> Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BRADLEY SCOTT SCHNEIDER		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">193898.16</div>	

  

Full Name (Last, First, Middle Initial) of Payee <b>XPS Professional Services</b>		Date <div style="display: flex; justify-content: space-around;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</div></div> </div>	
Mailing Address 220 E Adams St Suite 200		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1800.00</div>	
City Springfield	State IL	Zip Code 62701	
Purpose of Expenditure Door-to-Door GOTV Labor (ESTIMATE)	Category/ Type	Transaction ID : <b>SE.5009</b> Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: G. WILLIAM (BILL) FOSTER		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">246960.92</div>	

  

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">2430.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) <b>TOTAL</b> Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

  

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gregory Baise

Signature \_\_\_\_\_

[Electronically Filed]

Date

M M M

 / 

D D D

 / 

Y Y Y Y Y Y Y Y

11

 / 

02

 / 

2012

FEC Schedule E (Form 24/48) Rev. 07/2011

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 3 OF 4  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>New Prosperity Foundation; The</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00488494	
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee <b>XPS Professional Services</b>			Date MM / DD / YYYY <b>11 / 01 / 2012</b>	
Mailing Address 220 E Adams St Suite 200			Amount <b>1800.00</b>	
City Springfield	State IL	Zip Code 62701	Transaction ID : <b>SE.5010</b>	
Purpose of Expenditure Door-to-Door GOTV Labor (ESTIMATE)		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: <b>IL</b> <input type="checkbox"/> Senate District: <b>17</b> <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>CHERI BUSTOS</b>			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>230131.22</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee <b>XPS Professional Services</b>			Date MM / DD / YYYY <b>11 / 01 / 2012</b>	
Mailing Address 220 E Adams St Suite 200			Amount <b>1800.00</b>	
City Springfield	State IL	Zip Code 62701	Transaction ID : <b>SE.5011</b>	
Purpose of Expenditure Door-to-Door GOTV Labor (ESTIMATE)		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: <b>IL</b> <input type="checkbox"/> Senate District: <b>08</b> <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: <b>L. TAMMY DUCKWORTH</b>			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <b>280446.60</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>3600.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gregory Baise

Signature

[Electronically Filed]

Date

MM / DD / YYYY  
**11 / 02 / 2012**

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 4 OF 4  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>New Prosperity Foundation; The</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00488494		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on					
Full Name (Last, First, Middle Initial) of Payee <b>XPS Professional Services</b>			Date MM / DD / YYYY <b>11 / 01 / 2012</b>		
Mailing Address 220 E Adams St Suite 200			Amount <b>1800.00</b>		
City Springfield		State IL	Zip Code 62701		
Purpose of Expenditure Door-to-Door GOTV Labor (ESTIMATED)		Category/ Type	Transaction ID : <b>SE.5012</b>		
Name of Federal Candidate Supported or Opposed by Expenditure: <b>BRADLEY SCOTT SCHNEIDER</b>			Office Sought: <input checked="" type="checkbox"/> House    State: <b>IL</b> <input type="checkbox"/> Senate    District: <b>10</b> <input type="checkbox"/> President		
Calendar Year-To-Date Per Election for Office Sought <b>195698.16</b>			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		
			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee			Date		
Mailing Address			MM / DD / YYYY		
City		State	Zip Code		
Purpose of Expenditure		Category/ Type	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President		
Name of Federal Candidate Supported or Opposed by Expenditure:			Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶			<b>1800.00</b>		
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶					
(c) TOTAL Independent Expenditures.....▶			<b>9090.00</b>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature  <i>Gregory Baise</i>		[Electronically Filed]		Date MM / DD / YYYY <b>11 / 02 / 2012</b>	